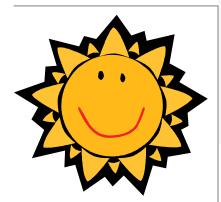
Newington Parks & Recreation

Playground Pals 2010

Where great summers begin!



Extended Care Option Available!

OUR PROGRAM

Is a great opportunity to meet new friends, develop respect, build self-esteem, and participate in activities in a safe and friendly atmosphere.

OUR ACTIVITIES

Include field trips, bowling, cookouts, special events, swim instruction, free swim, sports and group games, special guests, theme days, music, crafts, talent shows, and nature activities.

OUR STAFF

Work to provide a positive experience for all participants. Our staff is selected on the basis of their skills and talents, as well as their enthusiasm.

~ June 28th to August 13th ~

Open to children who reside in Newington and are registered for fall Kindergarten or completed Kindergarten this school year.

REGISTER EARLY—SPACE IS LIMITED!

PROGRAM INFORMATION

Our staff has an action-packed summer planned for your child! Activities include theme weeks such as Beach Week, Animal Week, Hawaiian Week, and Disney Week. There are also many exciting field trips planned! Registrants may sign up for all sessions. The ratio is approximately 1 staff member to 10 children. Playground Pals is held at the Mortensen Community Center Teen Center. Children should arrive to camp each day with a bagged lunch and snack with beverages. Children will participate in daily swim instruction and are asked to wear a bathing suit and bring a towel every day.

REGISTRATION INFORMATION

ELIGIBILITY: Open to children who reside in Newington and are registered for

fall Kindergarten or completed Kindergarten this school year. Those who completed 1st grade this school year are not eligible for this program. **Registration for this program is limited and**

accepted on a first come, first-served basis.

TIME: Staffed daily from 9:00 AM to 2:00 PM

DATES: The program runs Monday through Friday, June 28th to

August 13th. There is no program on Monday, July 5th.

PAYMENT: Payment is due at time of registration. Payment in the form of

cash, check, or credit card is accepted. Register by June 11th for additional savings! You must enroll in all desired weeks at the time of initial registration to take advantage of

multiple-week discounts.

EXTENDED CARE HOURS

Extended care hours are available from 2:00 to 4:00 PM for an additional fee.

CONTACT US

- Parks & Recreation, 131 Cedar Street, Newington, CT 06111
- The office is open Monday through Friday, 8:30 a.m. until 4:30 p.m.
- Phone: 860-665-8666 Fax: 860-665-8739 Web: www.newingtonct.gov
- Pool & Playground Hotline: 860-665-8766

Playground Pals 2010

What do we do at Playground Pals?

SPECIAL EVENTS & TRIPS

Each session, participants enjoy special events, entertainment and trips at the Playground Pals Program. Trips are offered using school bus transportation, and there is no additional fee. Events include cookouts, talent shows, playground Olympics, bowling, movies, special guests, theme weeks and much more!

SWIM INSTRUCTION

Swim instruction is offered to all participants.

DAILY SCHEDULE

Following arrival and opening announcements, the morning consists of planned activities, sports, games, and arts & crafts activity periods followed by lunch and story time. The afternoon consists of swimming and special event/ theme activities.

ARRIVAL AND DISMISSAL

Children should be dropped off inside the Mortensen Community Center at 9:00 AM and picked up at 2:00 PM. Your child must be signed in and out of the program, and proper photo identification must be shown. A child cannot be released to anyone other than those listed on the pickup authorization portion of the registration form. Children are not permitted to bring guests to the program. Take the time to meet and talk to your child's counselors.

WHAT TO BRING...

All participants should bring a water bottle, bathing suit, towel, sunscreen, hat, a lunch and a snack every day. Be sure to label all of your child's belongings.

EXTENDED CARE PROGRAM FOR PLAYGROUND PALS!

The Playground Pals Extended Care program will be staffed from 2:00 to 4:00 PM for those parents who need more time to pick up their child. Fees are:

\$24 for Week 2 \$30 per week for all other weeks

STAFF TRAINING

The Newington Parks and Recreation Department also requires all staff to attend an extensive Orientation and Training program. All staff is required by state law to receive training in Bloodborne Pathogens Exposure Control (HEPB/HIV). Staff also participate in training in the following areas: record keeping, personnel policies, department policies and procedures, customer service, arrival and departure of participants, safety, first aid, security, emergency response, on-site orientation, scheduling of activities, game leadership, child development and behavior, hands on activities, sports, and games.

RAINY DAY PROCEDURES

Playground Pals is held rain or shine. We try to hold the program outdoors in marginal weather. Please dress children for muddy conditions and pack a change of clothes.

PLAYGROUND INFO LINE

Once the Playground Pals program begins in June, please call the info line at 860-665-8766 for more information.

NOTICES AND FLYERS

If your child leaves early or will be away from the program for a period of time, check with your child's counselor for information about upcoming trips and other events or activities your child may not want to miss. A weekly newsletter is distributed at the end of every week.



For more information on Parks & Recreation
Summer Programs, visit us on the web at
www.newingtonct.gov

Details You Need To Know

LUNCH

You must provide your child's lunch and a daily snack. Please include an ice pack. There is no refrigeration available. Also, please send a water bottle. We ask that you do not send your child with nuts or nut products of any kind due to the prevalence of allergies.

BEHAVIOR EXPECTATIONS

Participants whose behavior interferes with a positive experience for other children may be subject to dismissal. The discipline procedure is as follows:

Stage One: Discussion with parent/guardian regarding behavior. Report is written up.

Stage Two: Child will be sent home for the remainder of the day and will be suspended from the program the following day.

Stage Three: The child will be sent home for the remainder of the day and suspended for one week's time. A referral to the Newington Human Services Department may be made.

Stage four. Dismissal from the program. The Parks & Recreation Department may use discretion in the disciplinary process.

MEDICATIONS, ALLERGIES, & SPECIAL NEEDS

Please note any medications, Epi-Pens or allergies that your child may have on a separate form. Our staff is not authorized to disperse medications of any kind. Our staff will supervise your child when they take medication. All Site Directors are trained in Epi-Pen Administration.

LATE PICK-UP FEE

An additional fee may be assessed for any participant who is repeatedly picked up late at the end of the day.

REFUNDS

No refunds will be given once you have registered for a program unless participants cannot attend due to an illness or injury. All refunds must be requested in writing to the Parks & Recreation Department and require a Doctor's written note. Refunds will not be issued once a program has begun.

Playground Pals 2010 Registration Form

Home Phone:	PARTICIPANT IN	FORMA	TION						
Parent 1 Name:	Child's FIRST Name:	Email: Town:			DOB: Zip Code:				
PICK-UP AUTHORIZATION I hereby authorize the following person(s) to pick up my child from the Newington Parks & Recreation Department's Summer Playgroup Program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this released. 1. Parent/Guardian Name: (1)	Home Phone:								
Parent 1 Name:	Address:								
Emergency Contact Information: please provide an additional contact (not residing with you) that we can contact in case a parent/guardian cannot be in Name:									
Relationship to Child:	Parent 2 Name:		Parent 2 Cell:		Parent 2 Work Phone:				
PICK-UP AUTHORIZATION I hereby authorize the following person(s) to pick up my child from the Newington Parks & Recreation Department's Summer Playgrou Program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release to parent/guardian Name: Parent/Guardian Name: (1)	Emergency Contact Information: ple	ease provide an ac	dditional contact (r	not residing with y	ou) that we can co	ntact in case a pa	arent/guardian ca	nnot be reached.	
I hereby authorize the following person(s) to pick up my child from the Newington Parks & Recreation Department's Summer Playgrour Program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release to the program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release to the parent/guardian number be included on this release to the program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to the parent/guardian must be included on this release to parent/guardian	Name:			R	Relationship to	Child:			
I hereby authorize the following person(s) to pick up my child from the Newington Parks & Recreation Department's Summer Playgrour Program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release at the following person of the program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this release at the following person of the f	Home Phone:				Work Phone:				
Program. If there are any changes in these arrangements, I will give written notice. Parent/guardian must be included on this released. 1. Parent/Guardian Name: (1)				ne Newington P	Parks & Recreat	ion Departmer	nt's Summer Pl	ayground	
Phone Relationship Relationshi	Program. If there are any changes in	these arrangem	ents, I will give	e written notic	ce. Parent/guai	rdian must be i	ncluded on this	s release.	
Name:									
### Relationship:									
Please check appropriate box(es)									
9:00 AM			July 6– 9					Week 7 Aug. 9-13	
Extended Care 2:00 PM—4:00 PM \$30 per week/ \$24 for Week 2 ID: 6769 ID: 6770 ID: 6771 ID: 6772 ID: 6773 ID: 6774 ID: CURRENT FEES Total Amount Due: Before June 11 June 11 Checks payable to "Newington Parks & Recreation" Credit Card # Exp. Date: Signature for Credit Card Head:	9:00 AM- 2:00 PM	ID: 6762	ID: 6763	ID: 6764	ID: 6765	ID: 6766	ID: 6767	ID: 6768	
\$30 per week/ \$24 for Week 2 ID: 6769 ID: 6770 ID: 6771 ID: 6772 ID: 6773 ID: 6774 ID: 6774 ID: 6774 ID: 6774 ID: 6774 ID: 6775 ID: 6775 ID: 6775 ID: 6775 ID: 6775 ID: 6775 ID: 6776 ID: 6775 I									
Before After June 11 Please Circle Payment: Cash Check Visa Mastercard Discover Checks payable to "Newington Parks & Recreation" Credit Card # Exp. Date: Signature for Credit Card Lice:		ID: 6769	ID: 6770	ID:6771	ID: 6772	ID: 6773	ID: 6774	ID: 6775	
ALL 7 WEEKS: \$450 \$485 Checks payable to "Newington Parks & Recreation" Checks payable to "Newington Parks & Recreation" Exp. Date: Signature for Credit Card Head.	CURRENT FEES	,		Tot	al Amo	unt Du	ıe:		
ALL / WEEKS: \$450 \$485 ————————————————————————————————————		1 1003	e Circle Payme	ent: Cash gton Parks & Recre	Check Vis	a Mastercar	d Discover		
Signature for Credit Card Hea:	ALL 7 WEEKS: \$450	Credit	Card #				Ex	p. Date/_	
711 TITELIA YEIV YEVV	.	Signa	ture for Credit (Card Use:			Date:		
ANY 1 WEEK: \$ 75 \$ 80 ** Signature required on the back of this form '	.		** Siana	ature real	uired on t	he back	of this fo	rm **	

WEEK 2*:

(NO Program July 5th)

changes on their child's registration form. All changes must be made at the Parks & Recreation Office. Changes cannot be made at individual sites.

Terms and Conditions of Registration

* Incomplete forms will not be accepted: My son/daughter has permission to participate in the Newington Parks & Recreation Department's Summer Playground Program. I hereby agree to release, discharge and hold harmless, the Town of Newington, its employees, contracted instructors and volunteers from any liabilities, which may occur while participating in the Playground Program, including field trips. I understand that participation in any recreational activity involves risk. I further understand that the Town of Newington does not provide accident/medical insurance for program participants.

Unless the Playground Program is restricted by a court order directed expressly to the Parks & Recreation Department (1) the Playground is hereby authorized to release the child to either parent (or persons authorized by either parent) on Playground property at any time during the day or arrangements for pick-up of the child have been made beforehand with the Parks & Recreation Office even if both parents do not live at the same address, and (2) to permit both parents to visit the child at the program. Disputes between parents, which involve the Playground in any way, must be resolved immediately by the parents, failing which the Playground shall have the right to terminate this contract and dismiss the child. Should such action be taken by the Playground Program, no refund will be made and the one who signs this contract will, nevertheless, be responsible for all amounts due the Playground Program as if the child had not been dismissed unless otherwise noted in writing. The parent irrevocably authorizes and consents to the Playground Program's use of the child's name, photograph, portrait or image in connection with the Playground Program's brochure or other promotional or advertising publication. The parent releases the Playground Program and shall indemnify and hold the Playground Program harmless from and against any and all claims, liabilities and expenses (including reasonable attorney's fees) arising from such use.

The Playground Program shall have the right to make all decisions regarding the participant's fitness to participate in particular activities or the entire Playground Program. At any time before opening day of the Playground Program season, the Playground Program shall have the right to cancel this contract if it determines, in its sole judgment; (1) that the physical, mental or emotional condition of the child would prevent him/her from participation safely and satisfactorily in the Playground Program or interacting positively with other children at the Program or (2) the child's parent(s) make an unreasonable demand on the Playground Program. Once the program has begun, the Playground Program shall have the right to terminate this contract and dismiss the child, if it determines in its sole judgment that the child's behavior: (1) proves detrimental to himself/herself, other participants or staff or property, or (2) displays bigotry, bullying or inappropriate sexual acts, or (3) the child's parent(s) make an unreasonable demand upon the Playground Program, or (4) the program fee has not been paid in full prior to the start of the program. Newington Parks & Recreation Department's Refund Policy: there are no refunds once you have registered for a program, unless there is an injury or illness, which is documented by a physician. Submit requests in writing to our office, accompanied by physician's documentation.

Emergency Medical and Surgical Treatment Release

Release: The information contained herein is accurate to the best of my knowledge. By my signature below, I consent to the following:

- A. Release any and all medical, insurance and/or other records to third party, which are in the possession of the Town of Newington or any other party referred to herein.
- B. For the Town of Newington to acquire medical insurance, and/or other data from third parties to be added to this record, and for those third parties to release such information to the Town of Newington.

I authorize duly-licensed physician, nurses and allied health professionals to provide such necessary medical care and to administer such routine diagnostic tests and procedures in the judgment of the authorized personnel as deemed necessary or advisable for the care of the individual person herein. If the information contained herein refers to an individual other than myself, I am their authorized legal representative and/or guardian and am hereby authorized to submit this material and execute this release form.

Special Needs / Authorization For Participants

YOU MUST SUPPLY A SUPPLEMENTAL FORM FOR CHILDREN WITH SPECIAL NEEDS and/or MEDICATIONS! Forms are available at the Parks & Recreation Office or online at www.newingtonct.gov

Parent represents to the Playground Program that written in the space below is his/her child's history of medica	I conditions or
surgical procedures, special needs, therapy programs and/or regularly taken prescription medications:	

Parent represents to the Playground Program that the participant is in sound physical and mental health and fully able to participate in all Program activities without need of individual or specialized attention or medical regimen and that the child's health will not impinge or impact negatively on other participants or the Playground Program. Parent agrees to advise the Parks & Recreation Department promptly in writing of any change in the child's physical or mental health between the date of enrollment and the start of the Playground Program season as well as throughout the dates of the program. The parent who signs this contract will be responsible for payment of all fees charged by the Playground Program.

I have read, understand, and agree to the above terms and conditions.

X	
SIGNATURE OF PARENT / GUARDIAN	DATE
PLEASE PRINT PARENT / GUARDIAN NAME	